



**2007 Virginia School Safety Conference
Application for Presentation**

Name of Presenter _____

Title _____

Organization Name _____

Mailing Address _____

Phone (_____) _____ - _____

Fax (_____) _____ - _____

Email Address _____

Course Title _____

Brief Course Description _____

Target Audience (please select all that apply)

☐ **School Resource Officers**

☐ **School Security Officers**

☐ **School Administrators**

☐ **School Counselors**

☐ **Teachers**

☐ **Other (please specify)** _____

[illegible]